

MONTANA DNRC RESTAURANT AUTHORIZATION FORM INSTRUCTIONS

The **Restaurant Authorization Form** must be completed when DNRC is purchasing fire related, sit down restaurant meals, and all restaurant prepared take-out meals delivered to an office. *This form is not needed for Sack Lunches or meals purchased for the fire line.*

Acceptable Uses:

- Fire camp meal is not provided and meals are on your own
- Multiple people are en-route to/from a fire assignment
- Severity and Seasonal resources that are held over and must be fed
- Individual meal paid with state credit card
- Office support staff or fire suppression personnel are unable to be relieved of duty and the meal is taken in the office as take-out. In this case, please ensure "Take Out" is selected on the form and include a brief justification.

Fire meals are the only meals that can include a gratuity that is not paid out of pocket to the vendor. A gratuity is only allowed for meals served in a restaurant and the maximum gratuity allowed is 15% unless it is clearly stated on the menu that large groups are charged a higher mandatory rate.

For Out of State Fire Assignments - Out of State meal rates are in effect from the time of departure from the home unit or point of departure regardless of method of travel.

For those involved in Fire Support, the meal rates are:

Meal	In State	Out of State	Out of Country
Breakfast	\$5.00	\$7.00	Federal/CONUS Per Diem Rates for Area
Lunch	\$6.00	\$11.00	
Dinner	\$12.00	\$23.00	
Total	\$23.00	\$41.00	

For those involved in Fire Suppression Efforts, Pursuant to MCA 2-18-501 the meal rates are:

Meal	In State	Out of State	Out of Country
Breakfast	\$10.00	\$7.00	Federal/CONUS Per Diem Rates for Area
Lunch	\$11.00	\$11.00	
Dinner	\$15.00	\$23.00	
Total	\$36.00	\$41.00	

The Restaurant Authorization form should be filled out in full and attached to the appropriate payment documentation. **A detailed restaurant receipt is required in all situations.**

If a direct bill with the vendor, a Vendor Invoice form should also be filled out and attached. Please make sure to include the Tax ID number and complete address of the vendor and obtain their authorizing signature.

If a State credit card is used, the credit card receipt must be included as well.

If Restaurant Take Out meals (not sack lunches) are being purchased the Restaurant Authorization Form must be completed and names are required. If names are not available (i.e. IA resources being dispatched) please include this in the justification. An overage of 20% of the total bill *is allowable in an exigency circumstance (i.e. IA, only one restaurant in town and menu prices exceed per diem/fire meal rates).*

MONTANA DNRC RESTAURANT AUTHORIZATION FORM

Area or Unit Office: _____	Date: _____	
Fire Name: _____	SABHRS/Incident #: _____	
Individual Name: _____	Crew Name: _____	Engine #: _____
Authorizing DNRC Employee's Signature: _____		
Printed Name: _____		
Payment Method: <input type="checkbox"/> State Credit Card <input type="checkbox"/> Vendor Charge Acct <input type="checkbox"/> Other		

Eat In Restaurant: <input type="checkbox"/> Take Out* <input type="checkbox"/> * Justification: _____		
Restaurant Name: _____		Federal ID#: _____
Address: _____		
No. of Fire Meals: _____		
Maximum \$ allowed per meal: \$ _____	Meal(s) cannot include alcoholic beverages. Any costs exceeding the maximum allocated amount must be paid to the vendor directly by the individual.	
Vendor Signature if charging/direct bill: _____		
Printed Name of all Personnel (Last name first) or attach list:		
1. _____	11. _____	
2. _____	12. _____	
3. _____	13. _____	
4. _____	14. _____	
5. _____	15. _____	
6. _____	16. _____	
7. _____	17. _____	
8. _____	18. _____	
9. _____	19. _____	
10. _____	20. _____	
Comments/Justification: _____		

DNRC Approval: _____ Printed Name: _____